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John C. Pokotylo

(Depositor's name)

John C. Pokotylo

(Signature)

June 18, 2004

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/054,667	11/13/2001	Masaaki Shibuya	OOCL-73 (US-P1535)	5240

TITLE OF INVENTION: PRINTER

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	07/08/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
TRAN, HUAN HUU	2861	347-192000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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1 Straub & Pokotylo2 John C. Pokotylo

3 _____

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Olympus Corporation

Tokyo, Japan

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

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John C. Pokotylo

June 18, 2004

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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/054,667
	Filing Date	November 13, 2001
	First Named Inventor	Masaaki SHIBUYA
	Group Art Unit	2861
	Examiner Name	Huan Huu Tran
Total Number of Pages in This Submission		Attorney Docket Number OOCL-73 (US-P1535)

ENCLOSURES <i>(check all that apply)</i>		
<input checked="" type="checkbox"/> Fee Transmittal Form (Form PTOL-85B) <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Postcard Receipt <input type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i>
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
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Signature	<i>John C. Pokotylo</i>
Date	June 18, 2004

CERTIFICATE OF MAILING			
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Signature	<i>John C. Pokotylo</i>	Date	June 18, 2004

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